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*None**JJZ*

** CONTINUING DATA *****

*None**JJZ*

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY VT	SHEETS DRAWING 16	TOTAL CLAIMS 70	INDEPENDENT CLAIMS 10
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>John J. Fabre, Jr.</i> <i>JJZ</i> Examiner's Signature Initials				

ADDRESS

30449

TITLE

FUNCTIONAL FREQUENCY TESTING OF INTEGRATED CIRCUITS

FILING FEE RECEIVED 2272	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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